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United Nations Population Fund

Country programme document for Panama

Proposed indicative UNFPA assistance: $5.7 million: $2.0 million from regular resources and $3.7 million through co-financing modalities and/or other, including regular resources

Programme period: Five years (2016-2020)

Cycle of assistance: Third

Category per decision 2013/31: Yellow

Proposed indicative assistance (in millions of $):

Strategic plan outcome areas		Regular resources	Other resources	Total
Outcome 1	Sexual and reproductive health	0.7	1.5	2.2
Outcome 2	Adolescents and youth	0.3	1.5	1.8
Outcome 3	Gender equality and women's empowerment	0.4	0.5	0.9
Outcome 4	Population dynamics	0.3	0.2	0.5
Programme coordination and assistance		0.3	–	0.3
Total		2.0	3.7	5.7

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Please recycle

I. Situation analysis

1. Panama is a multi-ethnic and multicultural country, with a total population of 3.4 million people (Census 2010). Out of the total population, 12.3 per cent is indigenous and 9.2 per cent of African descent; and 35 per cent are adolescents and youth (aged 10-29 years).

2. Panama had experienced strong economic growth over the past five years, with a gross national product of $11,000 (per capita) in 2013 (World Bank), and a Human Development Index of 0.765 in 2014 (ranking 65 out of 187 countries); however, it still ranks high within the region in terms of income inequality, with a Gini coefficient of 0.527. The greatest social and economic disparities affect indigenous populations: 84.1 per cent live in poverty and 11.4 per cent in extreme poverty. The main causes of these disparities are the social determinants related to indigenous populations; barriers in access and quality of services due to geographical dispersion; and the need to strengthen Government institutions at local and regional levels.

3. The maternal mortality ratio has stabilized (60 deaths per 100,000 live births) over the last 10 years; however, it is up to five times higher among indigenous populations, with 250 deaths per 100,000 live births reported in 2013 (National Institute for Statistics and Census). In 2009, institutional delivery, at the national level, stood at 92.8 per cent of all births but this figure dropped to only 53 per cent of births in indigenous communities (National Survey on Sexual and Reproductive Health). Although the total fertility rate is 2.46 children per women, in the indigenous group of the *Ngäbe-Buglé*, it rises to 4.46.

4. The contraceptive prevalence rate is 48.8 per cent for modern methods. In 2009, unmet needs for family planning among indigenous women from the *Ngäbe-Buglé* group was double the national average (80 per cent compared to 37.9 per cent); this indicates a need to strengthen the logistics management information system for forecasting and monitoring reproductive health commodities.

5. The adolescent fertility rate is among the highest in the region, at 87 births per 1,000 women aged 15-19 years. Teenage mothers account for 20 per cent of all births. There is a need to increase the availability of youth-friendly reproductive health services and the provision of comprehensive sexuality education.

6. The HIV prevalence rate is 0.65 per cent. The highest HIV prevalence rates are concentrated among men who have sex with men (26.3 per cent) and transgender populations (37.6 per cent). Adolescents and youth (aged 10-29 years) account for 24 per cent of all HIV infections. In 2013, women accounted for 8 per cent of new infections, compared to 2.4 per cent in 1993.

7. Gender inequalities persist. Panama had a Gender Inequality Index of 0.506, ranking 107 out of 187 countries in 2011. Panama has a low rate of women's representation at high decision-making levels, ranking 105th globally. Gender-based violence is a serious concern. Female homicide rates increased from 24 per 100,000 women in 2001 to 51 per 100,000 women in 2010.

8. The country has made progress in the availability of laws, policies, plans and data on population dynamics. However, more efforts are required to strengthen national and local capacities in implementing legal and regulatory frameworks and to assure the availability of recent and disaggregated data on adolescents, youth and excluded population groups as well as on gender-based violence, including sexual violence.

9. In the World Risk Index, Panama ranked 58 out of 178 countries, with a score of 56.84 on an intermediate scale of vulnerability to disasters; it is higher in areas susceptible to flooding, such as Colón, Panamá Este, Darien, Comarca Ngäbe-Buglé and Bocas del Toro.

II. Past cooperation and lessons learned

10. The second country programme (2012-2014), which was extended for one year, aimed at (a) reducing maternal mortality among the indigenous *Ngäbe-Buglé* women through a pilot initiative, using gender and culturally sensitive approaches; (b) increasing the availability of comprehensive sexual and reproductive health information, education and services, including on HIV prevention, for adolescents and youth; (c) promoting women's empowerment and autonomy as well as guaranteeing gender equity in public policies; and (d) increasing the use of high-quality, disaggregated socio-demographic data at national, subnational and local levels.

11. The 2014 country programme evaluation highlighted the following achievements. The programme (a) supported a pilot experience on maternal health in the *Ngäbe-Buglé* communities in the province of Chiriquí, with the involvement of regional and local health services, regional and local authorities, academic and community networks and traditional midwives; (b) developed a demonstrative experience in 12 health centres to deliver high-quality reproductive health services for adolescents and youth; (c) improved national capacity, particularly with the National Institute for Women, on gender mainstreaming in programmes and policies, including the elaboration of the National Plan of Equal Opportunities and the consolidation of the National Commission on Violence Against Women; and (d) supported the National Census 2010 and the National Survey of Sexual and Reproductive Health 2009.

12. The evaluation provided significant lessons learned and recommendations. One important lesson highlighted positioning interculturally sensitive approaches in the area of rights and sexual and reproductive health at the national level. The following recommendations were made: (a) based on the pilot experience gained in the Ngäbe-Buglé region, support the Ministry of Health in designing national sexual and reproductive health policies, programmes and plans that focus on indigenous populations; (b) scale up high-quality services for adolescents and youth; (c) continue supporting platforms and alliances to promote young people's rights and comprehensive sexuality education; (d) the use of reliable, high-quality data is an essential aspect of an effective evidence-based advocacy and communications strategy to support national policy decisions; (e) efforts to promote gender equality can improve women's access to reproductive health; and (d) the development of a strategy on resource mobilization, including government, private sector and traditional donors, is essential to achieving the proposed outputs of the new country programme.

III. Proposed programme

13. The programme is aligned with national priorities; the National Strategic Plan, 2015-2019; the United Nations Development Assistance Framework, 2016-2020; the Programme of Action of the International Conference on Population and Development and the UNFPA Strategic Plan, 2014-2017. The programme was formulated under the leadership of the Government, in close collaboration with civil society organizations, universities, donors and United Nations organizations; recommendations from the country programme evaluation were considered.

14. The proposed strategies will focus on advocacy and policy dialogue in support of government efforts towards achieving universal access to sexual and reproductive health and rights; reducing maternal mortality; achieving the country's commitments to the emerging sustainable development goals, with an emphasis on the most excluded and marginalized

population, including indigenous, Afro-descendants, poor women and girls, adolescents and youth. These efforts will be complemented by the generation of knowledge and capacity development, which will be the basis for targeted evidence-based policy, advocacy and advice on prioritized matters, using strategic communication initiatives. UNFPA will continue to use coordination mechanisms with United Nations organizations to strengthen synergies with the United Nations Children's Fund and the United Nations Development Fund (young and adolescents), the World Health Organization (maternal health), and UN-Women (gender-based violence), as well as other partners, such as International Organization for Migrants. These strategies will be gender-sensitive and aware of sociocultural diversity, and will adopt a human rights-based approach, supporting adolescent and youth participation.

A. Outcome 1: Sexual and reproductive health

15. Output 1. Strengthened national capacity to improve access to integrated sexual and reproductive health services (including family planning, maternal health and HIV), including in humanitarian settings, with human rights, gender and interculturally sensitive approaches. UNFPA will achieve this through advocacy, policy dialogue and knowledge management; this involves technical assistance aimed at (a) updating policies, standards and protocols for the delivery of high-quality sexual and reproductive health services, including family planning, with an emphasis on indigenous people, adolescents and youth; (b) promoting institutional collaboration to expand the delivery of high-quality, youth-friendly sexual and reproductive health services for adolescents and youth; (c) strengthening the use of a functional logistics management information system for forecasting and monitoring reproductive health commodities; (d) strengthening national, regional and local capacities among public institutions, universities, civil society organizations and youth networks for promoting sexual and reproductive health and the rights of adolescents and youth, including access to high-quality services; and (e) technical assistance for the implementation and institutionalization of the Minimum Initial Service Package for reproductive health in crisis situations.

B. Outcome 2: Adolescents and youth

16. Output 1: Strengthened capacity of public institutions and social organizations to design and implement comprehensive sexuality education programmes, including the prevention of adolescent pregnancy, that promote young people's rights and sexual and reproductive health. UNFPA will achieve this through advocacy and policy dialogue, including the provision of technical assistance and knowledge management, aimed at (a) promoting political and social dialogue and alliances for the implementation of legal frameworks on sexual and reproductive rights for adolescents and young people, including comprehensive sexual education and the prevention of adolescent pregnancy, including integrated, focused and multisectoral interventions; (b) strengthening civil society participatory platforms that advocate for adolescents and young people's rights, including sexual and reproductive rights; (c) evidence-based policy, advocacy and advice for young people, using strategic communication initiatives that involve public and civil society organizations, academia and the private sector.

C. Outcome 3: Gender equality and women's empowerment

17. Output 1: Strengthened capacity of government institutions and civil society organizations to promote gender equality, reproductive rights and women's empowerment. UNFPA will achieve this through advocacy, policy dialogue, knowledge management and technical assistance aimed at (a) promoting the implementation of social accountability mechanisms and legal frameworks to address reproductive rights of girls, adolescents and women, particularly from marginalized and excluded populations; and (c) strengthening

national capacity for a coordinated response to gender-based violence, focusing on sexual violence, targeting adolescents and young women.

D. Outcome 4: Population dynamics

18. Output 1: Strengthened national capacity to ensure the availability of data on socio-demographic issues, gender-based violence, sexual and reproductive rights, maternal mortality, adolescents and young people, for the formulation and implementation of evidence-based policies and programmes. UNFPA will achieve this through (a) systematic and well-structured knowledge-management initiatives, such as the development of research studies, surveys and the systematization of good practices and lessons learned, particularly related to youth, sexual and reproductive health, adolescent pregnancy, sexual violence and maternal mortality; (b) technical assistance to government institutions, including by brokering South-South collaboration, to produce high-quality disaggregated data (by ethnicity, age and geographic location) and other evidence on population dynamics, gender-based violence, including sexual violence, reproductive health, maternal health and the situation of adolescents and youth; and (c) advocacy and policy advice for the use of this data to formulate and implement public policies, plans and programmes at national and local levels.

IV. Programme management, monitoring and evaluation

19. UNFPA and the Government of Panama, through the Ministries of Foreign Affairs and Finance, will be jointly responsible for the management and monitoring of the country programme, in line with UNFPA guidelines and procedures, using a results-based management approach and established accountability frameworks. National execution is the preferred implementation arrangement, through carefully selected implementing partners based on their ability to deliver high-quality programmes. UNFPA will continuously monitor the performance of its partners and make adjustments, as necessary.

20. A robust results-based management approach will be applied for planning, monitoring and evaluating the country programme. To the extent possible, UNFPA will rely on national monitoring systems. Where feasible, UNFPA and other United Nations organizations will develop joint programmes.

21. The UNFPA country office includes staff performing management and development-effectiveness functions funded from the UNFPA institutional budget. UNFPA will allocate programme resources for staff members who provide technical and programme expertise and administrative support to implement the programme.

22. UNFPA will develop a resource mobilization strategy and partnership plan to engage government institutions, the private sector and donors to contribute and leverage resources towards achievement of the intended results. The strategy will include several modalities for contributions and partnerships.

23. The country office will seek technical support, including South-South cooperation, from the Regional Office for Latin America and the Caribbean and UNFPA headquarters. The programme will use national, regional or international expertise, as required. In the event of an emergency, UNFPA may, in consultation with the Government, reprogramme activities, especially life-saving measures, to better respond to humanitarian situations.

RESULTS AND RESOURCES FRAMEWORK FOR PANAMA (2016-2020)

National priority: Reduce social, cultural and territorial inequalities for a more inclusive society
UNDAF outcome: By 2020, the Government has implemented comprehensive national policies to increase social inclusion and equity
Indicator: Number of protocols, standards and guidelines implemented by the Ministry of Health in inaccessible and culturally diverse areas. *Baseline: 0; Target: 2*

UNFPA strategic plan outcome	Country programme outputs	Output indicators, baselines and targets	Partners	Indicative resources
Outcome 1: Sexual and reproductive health Increased availability and use of integrated sexual and reproductive health services, including family planning, maternal health and HIV, that are gender-responsive and meet human rights standards for quality of care and equity in access Outcome indicator(s): • Number of protocols for family planning services that meet human rights standards, including freedom from discrimination, coercion and violence *Baseline: 0; Target: 1*	Output 1: Strengthened national capacity to improve access to integrated sexual and reproductive health services (including family planning, maternal health and HIV), including in humanitarian settings, with human rights, gender and interculturally sensitive approaches	• Number of plans and protocols on maternal health, HIV and sexual and reproductive health focusing on indigenous peoples with human rights, intercultural and gender approaches *Baseline: 2; Target: 2* • Number of health services that have specific guidelines, protocols and standards for the delivery of quality sexual and reproductive health services for adolescents and youth *Baseline: 8; Target: 15* • Number of health regions supported by UNFPA trained to implement Minimum Initial Service Package for reproductive health *Baseline: 0; Target: 2* • Integrated logistics management information system is functional for forecasting and monitoring reproductive health commodities *Baseline: 0; Target: 1*	Ministries of Health, Social Development, and Security; National Commission on HIV; National Institute for Women; non-governmental organizations (NGOs); universities; National Commission for Indigenous Women	$2.2 million ($0.7 million from regular resources and $1.5 million from other resources)
National priority: Reduce social, cultural and territorial inequalities for a more inclusive society **UNDAF outcome:** By 2020, the Government has implemented comprehensive national policies to increase social inclusion and equity **Indicator**: Number of health services for adolescents that are measured according to a friendliness index in six health regions. *Baseline: 0;Target: 1* **Indicator:** Number of effective initiatives in intersectoral coordination, social participation mechanisms, political dialogue and accountability, driven by government agencies responsible for public policy management and guaranteeing human rights. *Baseline: 13; Target: 15*				
Outcome 2: Adolescents and youth Increased priority on adolescents, especially on very young adolescent girls, in national development policies and programmes, particularly increased availability of comprehensive sexuality education and sexual and reproductive health Outcome indicator(s): • Number of policies and programmes in place addressing sexual and reproductive health needs of youth and adolescents, including marginalized youth *Baseline: 2; Target: 4*	Output 1: Strengthened capacity of public institutions and social organizations to design and implement comprehensive sexuality education programmes, including prevention of adolescent pregnancy, that promote young people's rights and sexual and reproductive health	• Number of UNFPA-supported institutions that implement comprehensive sexuality education programmes *Baseline: 1; Target: 2* • Number of participatory platforms that advocate in favour of young people and adolescents rights, including the right to sexual and reproductive health services and comprehensive sexuality education *Baseline: 1; Target: 2* • Number of alliances among government institutions, the private sector, United Nations organizations that advocate and implement communication strategies for the prevention of adolescent pregnancy *Baseline: 0; Target: 3*	Ministries of Education; Health; Social Development; National Youth Council; Panamanian Coalition for Comprehensive Sexuality Education; University of Panama; Media; Private Sector; United Nations organizations	$1.8 million ($0.3 million from regular resources and $1.5 million from other resources)

National priority: Reduce social, cultural and territorial inequalities for a more inclusive society **UNDAF outcome:** By 2020, the Government has implemented comprehensive national policies to increase social inclusion and equity **Indicator:** Number of international human rights recommendations that have been ratified and applied in the country. *Baseline: 5 pending to be ratified; Target: 5* **UNDAF Outcome:** By 2020, Government has comprehensive mechanisms for the prevention and attention of all types of violence, including gender-based violence **Indicator:** Number of actions implemented in compliance with Laws 82 and 79. *Baseline: Law 82, Chapter IV, 0% of 11 actions; Law 79, Chapter VII 0% of 5 actions; Target: Law 82, Chapter IV, 80% of 11 actions; Law 79, Chapter VII, 80% of 5 actions*				
Outcome 3: Gender equality and women's empowerment Advanced gender equality, women's and girls' empowerment, and reproductive rights, including for the most vulnerable and marginalized women, adolescents and youth Outcome indicator(s): • Number of gender equality action plans that integrate reproductive rights with specific targets and national public budget allocations *Baseline: 0; Target: 1*	Output 1: Strengthened capacity of government institutions and civil society organizations to promote gender equality, reproductive rights and women's empowerment	• Number of civil society organizations and community-based networks supported by UNFPA that implement accountability mechanisms for addressing the reproductive rights of girls, adolescents and young women *Baseline: 4; Target: 8* • Number of public institutions supported by UNFPA with capacities to respond in an integrated manner to reproductive rights and gender-based violence, focusing on sexual violence, targeting adolescents and young women *Baseline: 2; Target: 4*	Ministries of Interior and Security, Public Ministry, Women's National Institute and Commission for Violence against Women; Ombudsperson, women's and civil society organizations	$0.9 million ($0.4 million from regular resources and $0.5 million from other resources)
National priority: Reduce social, cultural and territorial inequalities for a more inclusive society **UNDAF outcome:** By 2020, the Government has strengthened its capacities to manage public policies and governance mechanisms, including intersectoral coordination, social participation and accountability systems **Indicator:** The country has prioritized the sustainable development goals and is monitoring progress through reports every three years. *Baseline: 0;Target: 1*				
Outcome 4: Population dynamics Strengthened national policies and international development agendas through integration of evidence-based analysis on population dynamics and their links to sustainable development, sexual and reproductive health and reproductive rights, HIV and gender equality Outcome indicator(s): • Number of national household surveys developed by the country that allow the estimation of key population and reproductive health indicators *Baseline: 1;Target: 2*	Output 1: Strengthened national capacity to ensure the availability of data on socio-demographic issues, gender-based violence, sexual and reproductive rights, maternal mortality, adolescents and young people, for the formulation and implementation of evidence-based policies and programmes	• Number of research studies and surveys conducted on socio-demographic issues, adolescent pregnancy, maternal mortality, gender-based violence and sexual and reproductive rights of adolescents and young people information, with gender and cultural perspective *Baseline: 1;Target: 2* • Number of institutions using data and evidence obtained with UNFPA support for the formulation of policies and programmes *Baseline: 0; Target: 3*	National Institute for Statistics and Census; National Institute for Women; Ministries of Health, Interior, and Social Development; Gorgas Institute; University of Panama	$0.5 million ($0.3 million from regular resources and $0.2 million from other resources) Total for programme coordination and assistance: $0.3 million from regular resources